



For Internal Use Only

Permit Fee: \$ _____

State Surcharge \$ _____

Review Fee \$ _____

Receipt # _____

MECHANICAL (HVAC) PERMIT APPLICATION

Property Information

Address: _____ PID Number: _____

Legal Description (required if no address have been assigned): _____

Applicant is (check one): Owner Contractor Tenant Other: _____

Property Owner/Tenant Information

Name: _____

Address: _____
Street City State Zip

Phone (W) _____ Phone (H) _____ Fax _____

Mechanical Contractor Information

(Contractor must sign application only if they are pulling the permit)

Company Name: _____ Contact Person's Name _____

Address: _____
Street City State Zip

Phone (W) _____ Email _____ Fax _____

MN Registration #/Contractor License #: _____ *Master License # _____

Project Description

(Mechanical plan must be submitted with application)

Construction Valuation (REQUIRED) \$ _____

Permit Type

New Alterations

Type of Use:

Residential Other
 Commercial

PLEASE CHECK ALL THAT APPLY:

- Air Exchanger
- Central Air
- Gas Piping
- Infrared Heaters)
- Heating System
- Rooftop Units
- Ventilation
- Fire Suppression
- Fire Alarm
- Commercial Kitchen Hoods

*Commercial projects must submit plans for review and provide balance reports and startup tests when complete.
 Residential projects must submit plans and calculations to show compliance with the residential energy code.
 Separate permits are required for Electrical.*

FEE SCHEDULE COMMERCIAL:

Commercial construction 1.5% of the contracted price plus state surcharge. Minimum fee \$150

Roof top Units	\$150 / unit plus \$1 state surcharge
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Fire Suppression/Fire Alarm/Kitchen Hood Fee	1.5% of the contracted price plus state surcharge. Minimum fee \$150
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FEE SCHEDULE RESIDENTIAL:

Residential: New Single Family Home	\$120 plus \$1 state surcharge
Residential: Alteration Repair	\$80 plus \$1 state surcharge
Commercial construction	1.5% of the contracted price plus state surcharge. Minimum fee \$150

Residential: New Single Family Home \$120 plus \$1 state surcharge

Residential: Alteration Repair \$80 plus \$1 state surcharge

Furnace Replacement	\$40 plus \$1 state surcharge
Fireplace	\$40 plus \$1 state surcharge
A/C unit	\$40 / unit plus \$1 state surcharge

This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work has commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Contractor's Printed Name _____ **Company** _____

Contractor's Signature _____ **Date** _____

Homeowner/Builder Printed Name _____

Homeowner/Builder Signature _____ **Date** _____

Inspections must be called for at least 24 hours in advance (218) 454-5113.